PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

BIRCH, STEWART, KOLASCH & BIRCH, LLP P.O. Box 747 • Falls Church, Virginia 22040-0747

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## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the

Insert Title:	WORKING MEDIUM SUPPLY CONTROL SYSTEM IN HEAT EXCHANGER									
Fill in Appropriate	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:									
Information -	The specification w		as							
For Use Without	United States Appl	lication Numbe	10/524,011							
Specification	and amended on February 8. 2005					(if applicable	e) and/or			
Attached:	the specification w International Appl			and was						
	amended on		(if applicable)							
Insert Priority Information: (if appropriate)	amended by any amend I acknowledge the Regulations, §1.56.  I do not know and thereof, or patented or year prior to this application date of this application representative or assign patent or inventor's certapplication by me or my	do not believe to described in an cation, that the that the inven- n in any count is more than twatificate on this in legal representa- tions and the series of the application of the application of the application	the same was ever know y printed publication in same was not in publication has not been paten try foreign to the Unit relye months (six monthal invention has been filed tatives or assigns, excep- nefits under Title 35, Un	is material to pate on or used in the L cuse or on sale in ted or made the s ed States of Am his for designs) pr in any country for as follows.	entability as defined Jnited States of Ame ore my or our inven in the United States of ubject of an invento erica on an application to this application oreign to the United \$119(a)-(d) of any for pplication for patent /Year Filed)	in Title 37, Coorica before my ortion thereof or motor for the form of America more r's certificate issuation filed by mon, and that no and States of America preign application or inventor's certificate or inventor's certifica	de of Federal our inventior ore than one year ted before the e or my legal pplication for a prior to this n(s) for patent difficate having Claimed  No			
	(Nivershort)	(Country)		(Month/Day	/Voor Filed)	□ Yes	□ No			
	(Number)	(Country)		(Month/Day)	rear riled)	ies	NO			
	(Number)	(Country)		(Month/Day)	/Year Filed)	☐ Yes	□ No			
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below									
Insert Provisional Application(s):	(Application Number)			(Filing Date)						
(if any)	(Phanney) (v mile onie)									
	(Application Number) (Filing Date)									
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:									
	Country		Application Number		Date of Filing (Mon	th/Day/Yea <b>r</b> )	,			
Insert Requested Information: (if appropriate)							<del></del>			
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
Insert Prior U.S. Application(s): (if any)	(Application Number)	· · · · · · · · · · · · · · · · · · ·	(Filing Date)	- <del></del>	(Status - patented, p	ending, abandon	ed)			
Page 1 of 2 (Rev. 07/2003)	(Application Number)	<del></del>	(Filing Date)		(Status - patented, p	ending, abandon	ed)			

## Rec'd PCT/PTO 29 NOV 2005

Attorney Docket No. 2830-0189PUS1

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written hotice to the contrary:

Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 02292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

		<u> </u>								
Full Name of First or Sole Inventor: Insert Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
Full Name of First or Sole Inventor: Insert Name of brownfor Insert Date This Document is Signed	Tsuyoshi BABA	Tsuyoshi Bab	a/	Oct 20, 2005						
Insert Residence	Residence (City, State & Country)	1	CITIZENSHII							
Insert Citizenship →	Wako-shi, Saitama, Japan	r×	Japan							
trsert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country) c/o Kabushiki Kaisha Honda Gijutsu Kenkyusho, 4-1, Chuo 1-chome, Wako-shi, Saitama, Japan									
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHIP							
·	MAILING ADDRESS (Complete Street Address including City, State & Country)									
Full Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHIP							
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
Full Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
3	Residence (City, State & Country)		CITIZENSHIP							
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
rull Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHIP							
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
ull Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHIP							
	MAILING ADDRESS (Complete Street Address including City, State & Country)									

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Full Name of inventor,

\*DATE OF SIGNATURE